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APPLICANTS

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** CONTINUING DATA *****
 NONE, *ful*

** FOREIGN APPLICATIONS *****
 NONE, *ful*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 11/19/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 7	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
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35 USC 119 (a-d) conditions met
☐ yes ☒ no ☐ Met after
 Allowance

Verified and Acknowledged
 Examiner's Signature *[Signature]* Initials *ful*

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FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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